Retail Food Inspection Report

Floyd County Health Department Telephone (812) 948-4726

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Establishment Name CHICAGO CITY PIZZA						Est	Telephone Number Est 812-725-8407	Date of Inspection	ID#	
Address 2601 CHARLESTOWN RD, NEW ALBANY IN 47150						Ow	n 502-202-9302	08/04/2021		
Owner CHICAGO CITY PIZZA, LLC							Purpose X Routine	Follow Up	Released 08/14/2021	
Owner's Address 1808 E OAK STREET NEW ALBANY, IN 47150-							Follow-up			
Person in Charge RENEE STAMPER							ComplaintPre-Operational			
Responsible Person's Email							Temporary HACCP	Menu Type 1 2 3 _X	. 4 5	
Certified Food Handler RENEE STAMPER							Other (list)	1 _ 2 _ 3 2	3 _ 3 _	
				AND NARRATIVE COLUMN		" AND IN THE N	JARRAIVE COLUMN MARKED AS "R"			
Section #	C NC R Narrative							To Be Corrected		
239		Χ		Observed plastic cup being used as a scoop in pizza crust flour. Scoop TODAY						
291	needs to be durable with a handle. X Observed both quat and chlorine test strips expired.							8/13/21		
392	X Observed dumpster lid to be open.						ph o	TODAY		
393								8/13/21		
Summary of Vi	olations	(-	0 NC	_4_ R _0	_				
Received by (name and title printed): RENEE STAMPER							Inspected by (name and title printed): Christa Manus EHS			
Received by (signature):						I	Inspected by (signature):			
cc:					cc:			cc:		